

"Express Mail" mailing label number EL540669052US .

Express man maning ma				PTO/SB/01 (6-9 : 10/31/98 OMB 0651-00: RTMENT OF COMMERC					
Type a plus sign (+) inside this b 0010/PTO Rev. 6/95	OX → U.S. Department of Commerce Patent and Trademark Office	Attorney Docket Number	H 4199 PCT/US	·····					
DECLARA	TION FOR	First Named Inventor	GARCES GARCES, Josep						
UTILITY O	R DESIGN		COMPLETE IF KNOWN						
PATENT API	PLICATION	Application Number	Application Number 10/018,731						
		Filing Date	04/04/2002 -	/					
Declaration Ol Submitted with Initial Filing	R Declaration Submitted after	Group Art Unit							
	Initial Filing	Examiner Name							
I hereby state that I have reviewed an amendment specifically referred to about	Title of 06/23/2000 and to understand the contents of the above ove.	ght on the invention entitled:	tates Application Numbe						
I hereby claim foreign priority benefits ur certificate, or §365(a) of any PCT Interr and have also identified below, by check having a filing date before that of the app	ational application which designated a ting the box, any foreign application for	at least one country other than the Unite	d States of America, listed t	below					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY	Priority C Not Claimed	Certified Copy Attached? YES NO					
99112669.9 /	EP ,	07/02/1999 /		X					
		pplemental priority sheet attach		s) listed helow					
I hereby claim the benefit under Application Number(s)	Filing Date (MM/DD/YY)		Additional provisiona						
			application numbers are listed on a supplemental priority						

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231.

DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

"Express Mail Post Office to Addressee" service Mailing Label Number

sheet attached hereto.

Page 1

08760 Martorell, Barcelona

State

Zip

Additional inventors are being named on supplemental sheet(s) attached hereto



DECLARATION

Page 2

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. Parent Patent Number Parent Filing Date U.S. Parent Application **PCT Parent** (if applicable) (MM/DD/YYYY) Number Number 06/23/2000 -PCT/EP00/05806 Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Firm Name OR List Attorney(s) and/or agent(s) name and registration number below: Registration Name Registration Name Number Number <u>42,516</u> <u>32,891</u> Aaron R. Ettelman John E. Drach 18,980 36,296 Henry E. Millson, Jr. Steven J. Trzaska Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto. Fill in correspondence OR X Please direct all Customer 23657 address below or label correspondence to: Number John F. Drach Name Address **Address** State City 610-278-6548 Telephone 610-278-4925 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Name of Sole or First Inventor: A petition has been filed for this unsigned Suffix Middle Family **GARCES GARCES** Given <u>Josep</u> 1-00 e.g. Jr. Initial Name Name **Inventors** Date Signature Citizenship Spain > State Country **Spain** Martorell, Barcelona Residence: City Post Office Address C. Francesc Macia 19-3-1a Post Office Address Applicant Country Spain

Authority

· 		DE	JLARA	LΠ	()N			1	~~~~	ا سيڪيند،	4-1064	ν,		
V		DECLARATION								ADDITICAL INVENTOR(S) Supplem ntal Sheet				
Name of	Additi	onal Joint Ir	ventor, if a	any:				A petition	has been f	iled for			vento	
Given Name					Middle i			VILADOT	Suffix e.g. Jr.					
Inventor's Signature					Top	b l	المرابا	riladd		Date	15	12/21	101	
Residence City		Barcelona	ES	۲.	Sta	ite		Country	Spain		Citizenship	Spair	<u> </u>	
Post Office	Addres	s C. Comt	e d'Urgell 23	30-6-	2a									
Post Office	Addres	8			_									
City 0	8036 Ba	rcelona	State	•		Zip		Country	Spain		Applicant Authority			
Name of	Additi	onal Joint Ir	ventor, if	any:				A petition	has been 1	iled for	this unsig	ned in	vento	
Given Name					Midd Initia			Family Name				Suffix e.g. Jr.		
Inventor's Signature										Date				
Residence City					Sta	ite		Country			Citizenship	<u> </u>		
Post Office	Addres	s			-							_		
Post Office	Addres	s								-				
City			State	T		Zip	[Country			Applicant Authority			
Name of	Additi	onal Joint Ir	ventor, if	any:	:			A petition	has been t	filed for	this unsig	ned in	vento	
Given Name					Mide			Family Name				Suffix e.g. Jr.		
Inventor's Signature										Date				
Residence City	:				Sta	ate		Country			Citizenship			
Post Office	Addres	·s			_									
Post Office	Addres	s												
City			State	•		Zip		Country	·		Applicant Authority			
Name of	f Additi	onal Joint li	nventor, if	any:				A petition	has been	filed for	this unsig	ned in	vent	
Given Name					Midd Initia			Family Name				Suffix e.g. Jr.		
Inventor's Signature										Date				
Residence	:				Sta	ate		Country			Citizenship			
City	1													
	Addres	s												
City			-								•			

Additional inventors are being named on supplemental sheet(s) attached hereto